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2292 75	90 05/18/2005		have its own certifica	ite of mailing or transmission.		
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APPLICATION NO.	FILING DATE	FIRST NAI	MED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/937,904	11/09/2001	Leif Ra	amm-Schmidt	0696-0183P	5544	
TITLE OF INVENTION: A	PROCESS FOR EVAPORA	iing a solution and	AN EVAPORATOR FOR USE	IN THE PROCESS		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$0	\$1400	08/18/2005	
EXAM	INER	ART UNIT	CLASS-SUB CLASS			
BHAT, NI	NA NMN	1764	159-006100	_		
PTO/SB/47; Rev 03-02 of Number is required.  3. ASSIGNEE NAME AND	r more recent) attached. Use RESIDENCE DATA TO BE an assignee is identified bel.	PRINTED ON THE PATI	e name of a single firm (having astered attorney or agent) and the nastered patent attorneys or agents. no name will be printed.  ENT (print or type)  appear on the patent. If an assignment.		locument has been filed for	
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(A) NAME OF ASSIGNEE		(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
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OY CASPAR	ADO AB	Hel:	sinki, FINLAND	,		
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